

WEARABLE ART AWARDS

CONSENT FORM

A CONSENT FORM MUST BE SIGNED BY EVERY DESIGNER AND EVERY MODEL, OR THEIR PARENTS/GUARDIANS IF UNDER 18 YEARS

PARTICIPATION AND MEDIA / COMMUNICATIONS CONSENT FORM

PERSONAL DETAILS:

Name of Participant: _____

Date of Birth if under 18 years: _____

CONSENT TO PARTICIPATE:

Consent will be sought from a participant, or a parent or guardian of the participant by asking them to complete and sign this form.

CONTACT CONSENT:

I consent to my / my child's contact details being used on a mailing list to notify me/ my child of any updates for this event and any future wearable art events by signing this form.

BACKGROUND:

The Privacy Amendment Act 2001 imposes obligations upon organisations collecting personal information to protect that information. In recent years there has been an increase in marketing and communication activities for organisations and groups to maintain a positive profile in their local communities. These initiatives involved images of people being utilized in all forms of media including newspapers, radio, television and websites. Common methods of publication have included brochures, newspaper, radio and television advertisements, promotional videos and websites. In addition, there is widespread interest from media organizations for news and current affairs stories and for lifestyle programs. To ensure consistency with our privacy obligations and in keeping with child protection legislation, it is a requirement that an adult participant or a child participant's parent or guardian gives consent to participate in such activities.

COPYRIGHT:

At all times ownership of any materials obtained from the above activities will rest with The Rotary Club of Airlie Beach Inc. and The Whitsunday Reef Festival Committee

MEDIA AND COMMUNICATIONS CONSENT:

I authorize / do not authorize Wilmar Sugar and the Whitsunday Reef Festival Committee to take and use photographs, video and sound recordings of myself / my child or my/ his / her work and any other reproductions or adaptations of my / my child's likeness either in full or part, in conjunction with any wording or drawings.

I understand this material will be used for the purposes of advertising, promotion, media publicity, publication, display or web page usage in whole or part for these community organisations.

I consent / do not consent to the use of my / my child's likeness as specified by signing this form.

Full name of adult participant or child's parent or guardian:

Postal Address:

Telephone: (Home) _____ (Work) _____ (Mobile) _____

Email _____ **Fax** _____

Signature of Participant or Participant's Parent/Guardian:

Date: _____

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